



(CR)  
2828

PTO/SB/81 (11-04)

**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	09/942,459
Filing Date	8/29/2001
First Named Inventor	Alain Houle
Title	
Art Unit	2828
Examiner Name	Flores Ruiz, Delma R
Attorney Docket Number	CISCP713

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

**54406**

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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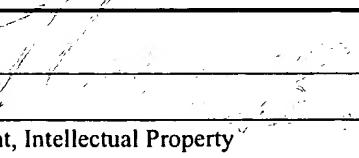
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).*

**SIGNATURE of Applicant or Assignee of Record**

Signature			Date	July <u>12</u> , 2005
Name	Robert Barr		Telephone	(408) 526-4000
Title and Company	Vice President, Intellectual Property			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.